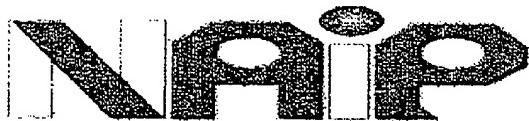


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Art Unit: 2627

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From : Winston Hsu, Registration No. 41,526

Serial No.: 10/709,024

Attorney Docket No.: VOSP0006USA

Subject: Information Disclosure Statement (IDS)

Total Pages: 4 pages (including cover page)

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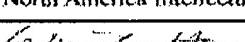
PTO/SB/21 (07-06)

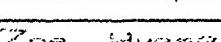
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TRANSMITTAL FORM		Application Number	10/709,024
		Filing Date	04/07/2004
		First Named Inventor	Yuan-Kun Hsiao
		Art Unit	2627
		Examiner Name	EDUN, MOHAMMAD N
Total Number of Pages in This Submission	3	Attorney Docket Number	VOSP0006USA

ENCLOSURES (Check all that apply)			
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> Alter Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD. Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> <input type="checkbox"/> Proprietary Information <input type="checkbox"/> <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):	
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	North America Intellectual Property Corporation		
Signature			
Printed name	Winston Hsu		
Date	SEP. 12 2006	Reg. No.	41,526

CERTIFICATE OF TRANSMISSION/MAILING			
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Signature			
Typed or printed name	Zoe Huang		Date SEP. 12 2006

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**Effective on 12/08/2004.
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).**
**FEE TRANSMITTAL
For FY 2005**

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) **0.00**

Complete if Known

Application Number	10/709,024
Filing Date	04/07/2004
First Named Inventor	Yuan-Kun Hsiao
Examiner Name	EDUN, MOHAMMAD N
Art Unit	2627
Attorney Docket No.	VOSP0006USA

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order None Other (please identify): _____
 Deposit Account Deposit Account Number: **50-3105** Deposit Account Name: North America Intellectual Property Corporation

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

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FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fee Paid (\$)
	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)	
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

2. EXCESS CLAIM FEES

Fee Description

Each claim over 20 (including Reissues)
Each independent claim over 3 (including Reissues)
Multiple dependent claims

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	
				Fee (\$)	Fee Paid (\$)
- 20 or HP =	x	=		50	25
HP = highest number of total claims paid for, if greater than 20.				200	100

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
- 3 or HP =	x	=	

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets **Extra Sheets** **Number of each additional 50 or fraction thereof** **Fee (\$)** **Fee Paid (\$)**

- 100 = / 50 (round up to a whole number) x = _____

4. OTHER FEE(S) **Fees Paid (\$)**
Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): _____

SUBMITTED BY

Signature	<i>Winston Hsu</i>	Registration No. (Attorney/Agent) 41,526	Telephone 3027291562
Name (Print/Type)	Winston Hsu		Date SEP. 12 2006

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Substitute for Form 1449A/PTO

INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(Use as many sheets as necessary)

Sheep

of

U. S. PATENT DOCUMENTS

Application Number	10/709,024
Filing Date	04/07/2004
First Named Inventor	Yuan-Kun Hsiao
Art Unit	2627
Examiner Name	EDUN, MOHAMMAD N
Attorney Docket Number	VOSP0006USA

FOREIGN PATENT DOCUMENTS					
Examiner Initials*	Cite No. ¹	Foreign Patent Document Country Code ² Number ³ Kind Code ⁴ (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages Or Relevant Figures Appear

Examiner Signature		Date Considered	
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*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 809. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. 1 Applicant's unique citation designation number (optional). 2 See Kind Codes of USPTO Patent Documents at www.uspto.gov or MPEP 801.04. 3 Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). 4 For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. 5 Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST.16 if possible. 6 Applicant is to place a check mark here if English language Translation is attached.

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